and health workers in Himachal Pradesh, Punjab, Haryana and Uttaranchal. Fumigation of the patients' houses (have been fumigated using formalin (10%) in the affected villages, as well as the transport vehicles.

IEC campaign for reassuring the general public not to panic, and also advising them to report to health facilities in case there was fever, cough, etc.

Spread of killer disease in neighbouring States

1518. SHRI RAJU PARMAR:
SHRI BHAGATRAM MANHAR:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that a mysterious disease with plague symptoms has spread in most of the villages in the State of Himachal Pradesh;

(b) whether there is possibility of spreading of the killer disease in the neighbouring States also including National Capital Territory of Delhi;

(c) if so, the steps taken by the National Institute of Communicable Diseases in various States; and

(d) whether all the hospitals in the north region have been alerted and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) Recently there was an outbreak of acute febrile illness with haemoptysis (blood in sputum) in Hatkoti village of Shimla district which has been confirmed by National Institute of Communicable Diseases as pneumonic plague.

(b) and (c) Following actions have been taken to prevent the possibility of the spread of the disease:

(i) On receiving report from the nodal officer for National

Surveillance Programme for Communicable Diseases a team from National Institute of Communicable Diseases consisting of epidemiologist, microbiologist and entomologist proceeded to the affected areas of Himachal Pradesh 14.2.2002 and on 22.2.2002 another team consisting of 6 public health experts was sent to Chandigarh. The teams visited the affected areas and examined the patients in the hospitals. They assisted and advised the State health authorities in containing the spread of infection.

(ii) The emergency medical requirements of the Government of Himachal Pradesh were promptly met with.

(iii) Guidelines were issued to health authorities of Government of Himachal Pradesh, Uttaranchal, Punjab Haryana and U.T. of Chandigarh for containing the spread of infection.

(iv) Door to door interaction with the population in the affected and adjoining village for dispensing antibiotics, obtaining information about the new cases and educating the people was conducted.

(v) Fumigation of the patients' houses were carried out using Formalin (10%)

(vi) About 28,000 to 30,000 people have been provided chemoprophylaxis.

The significant components of these guidelines are:

Quarantine of the affected village and close contacts of the patients.

Chemoprophylaxis (using Doxycline/Tetracycline/Board Specturm antibiotics) administed to the close contacts of the patients residents of the affected and neghbouring villages, doctors/paramedics and health workers in Himachal Pradesh Punjab, Haryana and Uttaranchal. Fumigation of the patients' houses (have been fumigated using Formalin *10%) in the affected villages, as well as the transport vehicles.

IEC campaign for reassuring the general public not to panic,

and also advising them to report to health facilities in case there was fever, cough, etc.

(d) The guidelines were issued by the National Institute of Communicable Diseaes to the concerned States and they instructed the district health authorities to be on alert.

Eradication of leprosy

†1519. DR. A.K. PATEL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the schemes run by Government for eradication of leprosy alongwith the number of leprosy patients detected and treated by Government under these schemes upto 2001;

(b) the details thereof, State-wise;

(c) whether Government are aware that a large number of such leprosy patients hang around the religious places; and

(d) if so, the steps proposed to be taken by Government to remove them from there?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) The Government of India is implementing the National Leprosy Eradication Programme (NLEP) for the climination of leprosy. The NLEP is being implemented as a 100% centrally sponsored scheme in all the States/UTs of the country with the objective of reaching the level of elimination i.e. leprosy cases less than one per ten thousand population in the country by March, 2004.

The details of cases detected and treated State-wise during last three years upto to 2001 is given in statement (*see below*).

†Original notice of the question was received in Hindi.